

FEC  
FORM 1

STATEMENT OF  
ORGANIZATION

RECEIVED

2013 JUN 10 AM 9:43

Office Use Only  
FEDERAL CENTER

1. NAME OF  
COMMITTEE (in full)

☐

(Check if name  
is changed)

Example: If typing, type  
over the lines.

12FE4M5

Byrne For Congress, Inc.

ADDRESS (number and street)

P.O. Box 2743

☐

(Check if address  
is changed)

Mobile

AL

36652

2743

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

☐

(Check if address  
is changed)

ashley.newman@live.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

☐

(Check if address  
is changed)

www.byrneforcongress.com

2. DATE

06

4

2013

3. FEC IDENTIFICATION NUMBER

C

4. IS THIS STATEMENT

☒

NEW (N)

OR

☐

AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

J. Ashley Newman

Signature of Treasurer

J. A. Newman

Date

06

04

2013

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office  
Use  
Only

For further information contact:  
Federal Election Commission  
Toll Free 800-424-9530  
Local 202-694-1100

FEC FORM 1  
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